Health for the year ending December 31st 1897 in the Kirton District of Heavitree.

Gentlemen

In the report which I now make to your council I propose first to deal with the general statistics of the District.

Acreage & Population

The total area of this district including both that part which is covered by houses & that which is under cultivation is 3500 acres with a population at last census of 6721 & an estimated one at June 1897 of about 7000. This latter figure corresponds with the estimated population in the middle of 1896 but is I believe substantially correct notwithstanding the increase in the number of inhabited houses in the District which has undoubtedly taken place. I am of opinion that the population was overestimated at the earlier date. From these statements it will be seen that the density of population is in the ratio of 2 persons per acre.

Vital & Mortal Statistics Births

During the year 146 births were registered in the District giving a rate of 20.96 per 1000. Of these 77 were males & 69 females, the rate in the former case being 11 & in the latter 9.86 per 1000. The highest number recorded being 18 in the month of November & the lowest 9 in February

Deaths

The actual number of deaths registered amounted to 133 or at the rate of 19 per 1000 living. Of these 43 who died in Public Institutions did not previously belong to the District & their deaths which give a rate of 6¼ must be deducted in estimating the corrected Death rate. Another factor has however to be considered before this latter can be accurately determined & that is the number of deaths which have taken place elsewhere among persons residents in this District as

ness of the Medical Officers of Health for neighbouring districts & from other sources these amount to 5 in number giving a rate of '71 per 1000. Making then the necessary deductions & additions the corrected rate for the year works out at one of 13·57. The greatest number of deaths recorded in any one month was 14 in April giving an average rate of 24·34 & the lowest 4 in July equal to one of 6·72 per 1000. It must be stated that these are the true corrected numbers & rates after the above mentioned deductions and additions have been made. Of this total number of deaths 70 were males being a rate of 10 per 1000 & 68 were females giving a rate of 9·71 per 1000. In the corrected figures the males & females numbered 44 & 51 respectively, the former thus equal to a rate of 6·28 & the latter one of 7·28 per 1000.

Ages at Death & Rates } Dealing now with the corrected figures only we find that the following are The several numbers & rates at the different ages.

| Ages | Numbers | Rates | |
|---|---|---|---|
| Under 1 year | 22 | 3·14 | per 1000 |
| 1 to 5 years | 11 | 1·57 | " |
| 5 to 15 " | 6 | ·857 | " |
| 15 to 25 " | 5 | ·71 | " |
| 25 to 65 " | 17 | 2·43 | " |
| 65 & upwards | 34 | 4·86 | " |

The number of infants dying under one year of age has been 151 per 1000 births or slightly over 15 percent.

Of the deaths which took place in Public Institutions among persons not previously resident in the District & which amounted to 43 the following particulars may be of interest.

| Name of Institution | No. of Deaths | Percentage |
|---|---|---|
| Exeter City Asylum | 35 | 81·4 |
| Wonford House Do. | 7 | 16·28 |
| Topsham Barracks | 1 | 2·32 |

Removing now to the Sidmouth proper we find that the largest no. of deaths recorded in any one particular part is 23. These have taken place in that portion comprising Fore Street & the adjacent thoroughfares & wards, Regents Square alone claiming no fewer than 11 or nearly 48 per cent. The minimum number registered being in Whipton where only one death has occurred.

Causes of Death. These may be tabulated as follows, their percentages of the total number & their rates per 1000 living being also stated.

| Disease | Number of Deaths | Percentage | Rate per 1000 |
|---|---|---|---|
| Infective Disease excluding Phthisis & Influenza | 11 | 11·61 | 1·57 |
| Phthisis | 9 | 9·47 | 1·28 |
| Respiratory Disease | 12 | 12·63 | 1·71 |
| Heart Disease | 13 | 13·68 | 1·85 |
| Influenza | 8 | 8·42 | 1·14 |
| Injuries | 1 | 1·05 | ·14 |
| All other causes | 41 | 43·15 | 5·85 |

Taking the Infective Diseases more in detail their various forms & rates per 1000 are as under.

| Disease | Number | Rate per 1000 |
|---|---|---|
| Diphtheria | 2 | ·285 |
| Enteric Fever | 3 | ·43 |
| Measles | 5 | ·71 |
| Whooping cough | 1 | ·143 |

No death from any form of violence has been registered as taking place in the District during the year, the above mentioned case, although that of a previous resident occurring in the Devon & Exeter Hospital. The cause of one death was uncertified a burial order being given by the Coroner, while in one other an Inquest was held. From the foregoing Statistics and others given below it will be seen that nearly 24 per cent of the cases notified under the Infectious Diseases Prevention Act ended fatally.

the Act must I think be considered satisfactory only 21 certificates having been received during the year. Of these the greatest number recorded was in January when 5 cases were notified, while in the months of May July & December the district was free from Infectious disease at least as regards new cases. I wish here to point out that in only two cases was the presence of Infectious Disease notified by the relatives of the patient as required by Section 3 of the Act. It would be very advisable that some measures should be taken to render the fact more generally known than it appears to be that the relatives of a patient ill of infectious disease, or in their default the person in charge, or the occupier of the house in which the case is situated, are bound to notify the existence of such disease to the Authority or rather to the Medical Officer of Health, they being in reality the first on whom the onus of notification has been imposed by law. There is I believe a very real danger through this not being enforced of the existence of infectious disease being concealed in certain cases especially in those where the knowledge of its presence might cause loss of business or where the disease itself is considered of such a trivial nature as not to require professional care, & thus risk is incurred of its being spread wholesale.

With the one exception of a row of seven houses in which two cases of Enteric Fever & one of Puerperal Fever occurred there has been no special incidence of these diseases on any particular part of the district. These cases were evidently due to defective Drainage & the filthy condition of the back yards, all of which has however been satisfactorily remedied

The total cost incurred by payment for certificates of notification has been £2.9.6 equal to about ½d a penny per head of population.

The cost of supplying the necessary disinfectants & of cleansing & disinfecting the premises where disease has occurred has in all cases been borne by the Authority.

Statistics.

| Disease | Number of cases |
|---|---|
| Scarlet Fever | 4 |
| Enteric " | 8 |
| Puerperal " | 1 |
| Diphtheria | 3 |
| Erysipelas | 5 |

Record of Sanitary Work carried out During the Year.

During the past year a very considerable number of Sanitary reforms have been effected and in this respect the measures adopted to prevent land & the drawing up of the necessary plans for the erection of what is the first requisite of a model Sanitary District namely an Isolation Hospital must be placed in the foremost position. Perhaps I may here point out that the object of such an Institution is not so much to deal with an existing epidemic of Infectious disease as to try to prevent its occurrence by isolating first cases. Without such means of isolation it is more than probable that all other precautions, no matter how carefully carried out will sooner or later prove ineffectual. In connection with the Hospital it is also proposed to provide an efficient form of disinfecting apparatus which will reduce the risk of the spread of infection through infected bedding & clothing, now impossible to control with certainty to a minimum.
The Infectious Diseases prevention Act has been adopted by the Authority on my advice.

Dairies, Cowsheds & Milk Shops. These have been systematically inspected by the Inspector of Nuisances & myself and a joint report submitted to the Council. Acting on this report bye-laws were passed regulating the Sale of milk & providing for the proper sanitary condition both of the Dairies & cowsheds. In many cases Notices were served & improvements carried out which have had the effect of rendering the Dairies in the District suitable places for the Storage of milk & the cowsheds such as to secure so far as possible the health of the animals themselves.

Slaughter Houses. These premises have been on the whole maintained in a Sanitary condition, though in one case at least notices had to be served & frequent inspections made in order to secure this end.

Bakehouses. The different bakehouses have been inspected & any suggestions necessary for their improvement made. During the year two new bakehouses have been erected in the District.

Conditions affecting the Public Health, under this heading the chief ones in this District may perhaps be enumerated as follows
1) Proper supply of pure water for domestic purposes
2) Efficient flushing & ventilation of Drains & Sewers
3) Reasonably frequent removal of house refuse & ashes

The question of water supply is perhaps the one which presents most attention. Dealing with what I may call the more strictly urban portion of the district, the water supply is derived from two sources. The greater part is supplied from the mains of the Exeter Water Co, the remainder by numerous shallow wells. The former source may perhaps not be all that is desirable considering the amount of undoubted sewage pollution which the river Exe undergoes above the intake, & which may or may not have been removed before it reaches the consumer, but it is distinctly the best available at present. The latter source is I think open to grave suspicion in many cases if not in all. Speaking generally the situation of these wells are not at all satisfactory. Many of them are placed in small enclosed badly paved or unpaved back yards, which are frequently made places for depositing animal & vegetable matter & perhaps for throwing away dirty & possibly contaminated water. A risk is thus run of foul matters & fluids finding their way into wells especially those whose construction is such as to offer little obstacle to this ~~but~~ taking place. Then again many of them are apparently situated directly in the flow of the subsoil water thus rendering it possible for contamination to reach the well from a distance.

The efficient flushing of drains - that is house drains - depends in a great measure on the cleanly habits or otherwise of the house holders themselves, at the same time reasonable facilities for so doing should as far as possible be provided.
Proper ventilation is also most important & should be provided in all cases.
The public sewers are at present flushed when necessary & the greater part of the drainage system ventilated by shaft ventilators. One portion of the district sewers ~~are~~ were however originally constructed without such.

importance. The retention of both animal & vegetable refuse, which is prone to decomposition on house premises is a habit which cannot be too strongly condemned. How then is it to be dealt with? The solution of the question is not far to be sought. If instead of heaping up ashes dust & house refuse each day to be removed by the Scavenger at more or less frequent intervals, people would only adopt the simple expedient of destroying in the kitchen fire each evening all organic matters collected on the premises it would not only be a far more healthy system for themselves, but it would leave only the ashes & similar harmless substances for subsequent removal & disposal which would be effected without the creation of those foul smelling & intolerable nuisances called scavenging refuse heaps.

I may I think conclude my report by laying down the lines on which future action should in my opinion be based.
I need not allude further to the Isolation Hospital beyond advising that the matter be not unnecessarily delayed.
The well question may properly receive the attention of this Council. I am aware that it is surrounded by circumstances which render its solution a matter of some difficulty. I cannot however but think that it would be possible to at least have, short of bringing the Bos water into each house, stand pipes erected in suitable positions from which water could be obtained, & the wells abolished.
With regard to those public sewers which are still without means of ventilation, it is in my opinion advisable that this should be provided & a uniform system all over the district adopted.
The scavenging arrangements also admit of improvement. It is I fear a common occurrence for animal & vegetable refuse to be left either thro' the default of the scavenger or the householders themselves, for two or three weeks at a time, thrown in the corners of back yards there to decompose & pollute both the surrounding air & soil. Many houses too are unprovided with ash-pits even of the most common description which increases the difficulty of dealing with house refuse unless householders can be induced to act on the suggestion I have made above & cremate their refuse its more frequent removal becomes necessary especially in the case of courts & alleys in which danger from its accumulation is greatest.

John Tillett Medical Officer of Health.